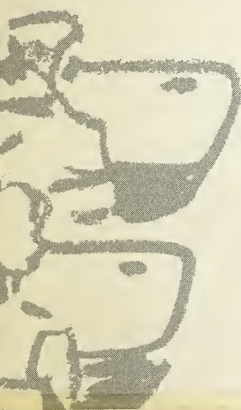


Helping the Partially Seeing Child in the Regular Classroom



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Pennsylvania Association for the Blind

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helping the partially seeing child in the regular classroom

Alert and knowledgeable teachers frequently are the first to become aware of children who deviate from normal in the school population. Those children who deviate from normal only because of visual limitations are called the partially seeing.

The partially seeing child is one whose capacity to achieve in school, commensurate with his ability, is limited by visual problems. One of the commonly used criteria for identifying these children for educational purposes is based on distance visual acuity: corrected vision in the better eye of 20/70 or less. It is estimated that one child in 500 of the school age enrollment is in this category.

4/20/78 Letter Request

Most of the children who have been identified as partially seeing attend schools in their home communities; yet they are not necessarily receiving the special services through which they will have an educational opportunity equivalent to that of their normally seeing peers.

Under ideal conditions, qualified teachers of the partially seeing are available to the staff of the local school system. Thus, the regular classroom teachers have an opportunity to discuss and plan with these specialists for the particular needs of the children with vision problems. Such children, as a result, are able to participate more fully with their classmates. Often the specific recommendations made for them benefit all of the children in the class.

When the services of a special teacher are not available, the regular classroom teacher is responsible for meeting the needs of the partially seeing children to the best of her ability. To do this, she must call upon her own ingenuity as well as community resources to supplement her training as a teacher. Large print materials, Talking Books, tape recorders, typewriters and low vision aids — valuable as all of these are — may provide only a part, not the whole, solution to the child's educational problems.

In addition to providing assistance for the already identified partially seeing children, the regular classroom teacher frequently shares the responsibility for identification of others with similar difficulties. Because a visual limitation is not always an obvious one, it often goes undetected. This factor alone establishes the need for better and earlier recognition of such limitations.

Establishment of total school-wide vision screening programs, with adequate follow-up of those referred for eye examinations, is one major step toward better identification.

Another is recognition of the vital role which the classroom teacher can play by sharing information based on her observations of pupil behavior. Clues which she provides can help to identify the children with vision problems who are missed in screening.

BEHAVIORAL PROBLEMS

Certain behavioral patterns, signs and symptoms sometimes are indicative of eye problems in children. If they occur, the teacher should make a note on the child's record, make referral if indicated and follow up on the referral. The results may provide guidance in making adjustments in educational procedures.

Eye problems may be present if the child manifests any of the following:

- Attempts to brush away blur, rubs eyes excessively, frowns.
- Shuts or covers one eye, tilts head or thrusts it forward when looking at near or distant objects.
- Has difficulty in reading or in other work requiring close use of eyes.
- Blinks more than usual, cries often or is irritable when doing close work.
- Stumbles or trips over small objects.
- Holds book or small objects close to eyes. (It may be necessary for some children who have severe vision problems even after correction to hold books close or at odd angles.)

- Is unable to participate in games requiring distance vision.
- Is unduly sensitive to light.
- Has red-rimmed, encrusted or swollen eyelids; recurring styes; inflamed or watery eyes.
- Complains that he cannot see well; that he experiences dizziness, headaches or nausea following close eye work; that he has blurred or double vision.

Sometimes a visual defect may manifest itself in restlessness, lack of interest in sports, in reading, or other activities requiring prolonged close use of the eyes.

Particular attention should be paid to previous classroom teachers' records of observations of the child's behavior in a variety of school situations.

USING THE HEALTH RECORD

The health record will provide valuable information for educational planning.

1. Review the cumulative health record of each child.
2. Check carefully on information concerning the child's visual status and recommendations;
 - a. If a child wears glasses, the record should state whether the glasses are to be worn constantly or only for certain types of visual activity.
 - b. If the record does not contain specific information concerning the wearing of glasses, contact the child's parents, school nurse, physician or eye specialist for the information.

- c. A federal regulation requires that all eye glasses and sun glasses must be impact resistant. Sturdy, non-flammable frames are recommended.
3. Note any directions regarding restrictions necessary to safeguard the child's residual sight.
- a. Children with some types of degenerative eye conditions may be restricted in the amount of physical activity which involves jumping, bending or body-contact sports. If such specific restrictions are not entered on the child's health record, consult the nurse and/or physician serving the school for instructions.

SEATING ARRANGEMENT

- 1. Preferential seating should be emphasized depending upon the child's eye condition.
- 2. Arrange desks and location of teacher so that pupils do not face the light. Avoid the possibility of a pupil sitting in his own shadow.
- 3. Provide adjustable desk tops or desk easels to insure the child having the best light on his work and to enable him to bring his material close enough to his eyes while maintaining good posture.
- 4. Permit the child to sit as near to the chalkboards and demonstrations as necessary for him to obtain the best view.

USE OF MATERIALS & EQUIPMENT

● Reading

- 1. Reading materials for *all* children should be carefully selected to assure clear type and pictures; adequate spacing between lines, words and letters; adequate margins; good quality

paper with non-glossy finish; maximum contrast between background and printing.

2. Many partially seeing children require larger-than-average print: books printed in 18 or 24 point type.
3. Distance of reading material from eyes need not be arbitrary but may be determined in part by the child's ease and comfort in seeing. Some children may need to hold books at closer range than others if they are to see clearly. In such cases, it is important that the child maintain good posture while attaining comfortable reading distance. Adjustable book racks are available commercially or can be made in school shops.
4. Some children may require frequent eye rest periods to prevent blurring.

● Writing

1. The teacher's chalkboard writing should be large, preferably with a fairly broad stroke. She should read aloud the material she is putting on the board during demonstrations. Lists of spelling words, test questions and homework assignments for the partially seeing should be written in large, clear cursive or manuscript style.

The classroom teacher can cultivate the practice of preparing her original copy in enlarged form. This copy can then be given directly to the partially seeing child after the teacher has transferred the material to the chalkboard.

2. The amount of copy work should be limited for all children but especially for those with severe visual

loss. The majority of partially seeing children should be encouraged to write larger than the average and use manuscript writing if this is simpler for them. Many school systems now teach manuscript writing to all primary grade children.

When cursive writing is introduced, the teacher should encourage the child to use either manuscript or cursive style, whichever is easier, clearer and of proper size. The partially seeing child, however, must become familiar with cursive writing and must not be prohibited from using it. Partially seeing children can do much of their arithmetic work directly on the chalkboard, thus obviating the need to copy problems or work with smaller figures.

- **Tape, Talking Book Machines and Large Type Typewriters**

1. Materials not otherwise available may be recorded on tape. Because partially seeing children must obtain so much information through hearing, the availability of recorded material relieves them of possible fatigue associated with prolonged reading tasks. The ability to replay the tapes can help to insure greater understanding and learning from recorded material.

The teacher should make every effort to help the child develop his listening skills. To obtain the greatest benefit from recorded material, the child must learn the discrimination needed to select the most important points in the material he hears. The guidance of the teacher, supplemented by study sheets and questions on content related to the topic, can help the child to develop this ability.

2. Much supplemental reading can be done with the use of a Talking Book Machine and records.
3. Typing should be a basic skill subject for partially seeing children, most of whom find typewriters, either large-type or standard models, valuable tools. Not only does typing provide opportunities to change eye focus, which is restful, but, once the touch system is mastered, assignments can be prepared with speed and ease. Typing is particularly helpful for the partially seeing children who may have difficulty writing in a clear legible fashion even in manuscript style, because they do not see letters clearly.
4. In general, the use of duplicated material should be avoided. If duplicated material must be used, copies should be dark, clear, on opaque paper and have good contrast between print and paper.

● Low Vision Aids

1. Magnifiers, useful only to some partially seeing children, are not substitutes for suitable print size and/or teacher aid.
2. Telescopic and microscopic lenses and other low vision aids are useful to some children with low visual acuity. When low vision aids are prescribed, the teacher should encourage the child to use them.

● Maps and Globes

Maps and globes should have little detail. Work maps can be duplicated if boundaries and legends are clear and large enough to be seen with ease. Outline maps are available from most school supply companies or they can be drawn by the teacher.

● Pencils, Pens and Paper

Pencils with soft, thick lead are preferable. Encourage the use of non-glossy paper. If the paper is ruled, choose a type with widely spaced lines. Pens that make broad strokes are now available even in ball-point style.

● Teaching Methods

Methods of teaching reading, writing and arithmetic are the same for all seeing children, but some partially seeing children will need individual instruction in each of the three major subject matter areas.

● Assignments

1. If the assignment must be modified, try to arrange for the partially seeing child to perform the task at the same time and in the same length of time as his classmates do it. Modifying the assignment may mean shortening a drill lesson, i.e., arithmetic, or changing the requirements for a report from one prepared through visual reading to one in which the child uses hearing, i.e., "book report" from Talking Book records or tapes. The teacher must be very careful that she is motivated to modify assignments by understanding and not leniency.
2. Clear assignments and specific classroom instruction can help each child to understand what is required.
3. Clear speech is essential. An individual with poor vision is quite dependent upon hearing distinctly.
4. The partially seeing child may participate safely in most regular grade activities, but some substitution may be necessary for sewing, mechanical drawing and other activities demanding close eye work and discrimination of fine detail.

● Eye Health and Safety

The principles and practices of eye hygiene should be a definite part of the instructional program for all children but are especially important for partially seeing children. Material on the function and care of the eyes should be integrated whenever possible into units on health education, and opportunity should be given at all times to practice good eye health and safety habits in all school activities. As stated earlier, safety lenses of shatter-resistant glass or plastic must be used for spectacles. Safety lenses and other protective eye-wear which comply with quality and performance requirements of American Standard Codes are recommended. All safety lenses should be mounted in sturdy, flame-resistant frames.

● Psychological and Achievement Tests

Valid psychological scores may be obtained on partially seeing children only by individual testing administered by a psychologist. Some children may be able to read the material for the achievement tests given in the regular classroom while others may require tests which have been reproduced in large print or which are in regular print but are untimed.

CONSIDERING THE INDIVIDUAL CHILD

1. Let the child know you are happy to have him in the group or class. The resulting environment of acceptance helps the child to develop a healthful mental attitude toward himself and his lack of good vision.

2. Social casework service may be indicated where emotional trauma is evident.
3. Help the child accept himself as he is so that he will be able to judge what he can do well and to recognize what he cannot expect to do as well as those with good vision.
4. The school counselor is in a position to help the partially seeing student determine and realize attainable goals and to guide him into endeavors through which he will achieve them.
5. Expect and permit the child to make contributions at his ability level. See that he does the assignment. Don't let him just "get by."
6. Consider allowing extra time for or shortening unusually long assignments. Because of the greater effort needed to see, some partially seeing children may not be able to work efficiently throughout the entire class period. They may make more errors if assignments are too long.

MYTHS

Using the eyes is harmful.

Glasses are a cure-all.

Discard glasses; eye defects and deficiencies are correctible without them.

All partially seeing children need large-print books. The largest type available is advisable.

A person with only one eye has to put undue strain on it.

The nearsighted child should be restricted in all recreational activities.

Planned classroom periods of rest for the normal child are not sufficient for the partially seeing.

"Eye strain" is a medical term.

People with low vision have a sixth sense.

FACTS

Use does not injure the eye.

Glasses cannot correct all vision problems.

Some refractive errors can be corrected by lenses; some muscle weakness can be corrected by eye exercises.

Some partially seeing children can read ordinary type. The decision is made for each child individually.

A healthy eye is not harmed by use.

Certain restrictions may be in order for the nearsighted but there are many recreational activities in which they are quite able to participate.

If the partially seeing child is in good physical condition he does not need more rest than his classmates.

Eyes cannot be "strained," but may tire.

People with impairment of any sensory organ can be helped to make better use of the other senses.

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Pittsburgh Branch, Pennsylvania Association for the Blind, is a voluntary agency which has the prevention of unnecessary blindness as a major objective.

Prevention of Blindness activities are an integral part of the Welfare Services of Pittsburgh Branch, Pennsylvania Association for the Blind, a member agency of the Community Chest of Allegheny County.

Prevention of blindness activities include casework services to partially seeing children, their parents and teachers; medical social casework for persons with glaucoma, cataract, diabetic retinopathy and other specific eye diseases; and public education programs on vision screening, glaucoma, eye safety and related subjects.

Publications, films, speakers bureau, and consultative services are available upon request.

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